FOR INSTRUCTIONS, SEE BACK OF FORM	FORM	
DISCLOSURE SUMMARY PAGE	DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization).	(Rev. 05/2002)	REPORT
FISHER FOR CLIVE COUNCIL COMMITTEE	For Office Use	Only
<u></u>	{	
IMPORTANT: Indicate type of committee you are reporting for:	1 (
(1)Statewide/Legislative Candidate (2)Statewide 2 (CState AMPAGALINT Local Candidate (5)County PAC (6)Ballot Issue/Franchise committee	1 1	
(5) County PAC (6) Ballot Issue/Franchise Committee U.L. Continue (8) Support State of Candidates	1 1	
CANDIDATE COMMITTEES ONLY: DEC 1 3 2003]	
Candidate Name EMAIL Politic I Party	L	
Carrie Grenet		
Office Sought (if Senate or House)		
CLIVE COUNCIL		
Raley Fisher 229.094	n 18	1.13.3
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE		SIGNED
SURFICIE OF THE POOR LET (OF POOR IT HAND AND TOPON)		
Routine Penalties Due For Late Filed Reports Range fro	m \$20 to \$800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:		
AM FILING A Trial REPORT FOR ANA (1) ELECT	TON //2\NON ELE	CTION VEAD
	ate one	CHON TEAM.
i e e e e e e e e e e e e e e e e e e e		**************************************
	cal Committees, enter	
1 st of month following election		04.03
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports and attach Notice of Dissolution Form DR-3.	unty & Local Committ ich Election is held	lees, enter County in
(You must continue to file representation of the continue	P	OLK
The first		
(You must continue to file report and all act Notice of Dissolution Point Dissolutio		
CASH ON HAND at the beginning of the check all monies held		
by the committee. This amour Scar and at the end		- 30
of the last reporting period, or I	\$	5.30
ADD TOTAL MONEY TAKEN		
Schedule A: Cash Contributior in-kind below)		
Schedule F: Loans Received total (Attach Schedule F)		····
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	******	
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans belo	w)	5.3
Schedule F: Loan Repayments total (Attach Schedule F)		
CASH ON HAND at the end of this reporting period (if final report, balance must		
be zero) (Attach DR-3)	.\$	4 .
De Zolo, (Altacit Dir O)		
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	4621.1
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)		

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTE	E NAME (Must be:	same as on Statement of Organization)		
FISHE	R FOR CL	IVE COUNCIL COM	MITTEE	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/12/03	CK# DIR. DEBIT	SELF	REDUCE SCHEDULE E BY AMOUNT RESERVED TO PAY LAST MONTH'S	5.30
	ID#	:	BANK FEES WHICH WERE NOT CHARGED	
	ID# CK#			
	ID# CK#		:	
•	ID#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL TOTAL (if last page of this schedule)	5.50

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Expenditures to persons/entities providing consulting, advertising, fund-reising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i)...)

Page of

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

COMMITTEE NAME (Must be same as on Statement of Organization)

FISHER FOR CLIVE COUNCIL COMMITTEE

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS	
CHECK THIS BOX IF		

		<u> </u>			
DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
11/13/03	SELF NON CHARGE: BANK: REVERSED SVC.	Fees		\$ (5.30)	
1/10/03	BALANCE BROUGHT FORWARD			4626.46	
		:			
	-				
		:			
		:			
		:	SUB-TOTAL	\$:	
			TOTAL (If last page of this schedule)	s 4621.16	

isclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the minutee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no nilial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule E)